

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 7-6-07
Case #: 35P30671
County: Gibson

Address: 7677 W. 435 North
Dacula, IN

Type of Laboratory Seizure (check one)

- ☒ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence
☐ Outbuilding
☒ Vehicle
☐ Hotel/Motel
☐ Open - No Structure
☐ Other:

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): 1
☐ Red Phosphorous/Iodine Reaction(s): _____
☐ Flammable Solvents: 2
☐ Water Reactive Metal (Lithium): _____
☐ Anhydrous Ammonia: 1
☐ Hydrochloric Acid Gas Generator(s): 1
☐ Corrosive Acid: 1
☐ Corrosive Base: 2
☐ Other (item and location): _____

Child under age 18 discovered (check one)

- ☐ Yes 2 (number present)
☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
☐ Retail/Merchant Tip
☐ Other: _____

This report is to be faxed to the following agencies that serve the location:

Fire Department: White River Township

Fax: 812 385-8702

Health Department: Gibson Co.

Fax: 812 386-8027

Child Protection Service: _____

Fax: _____

For further information regarding this methamphetamine laboratory, contact
Investigating Officer: R. Johnson 7804 Phone 812 454-7485

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.